

FIG-1

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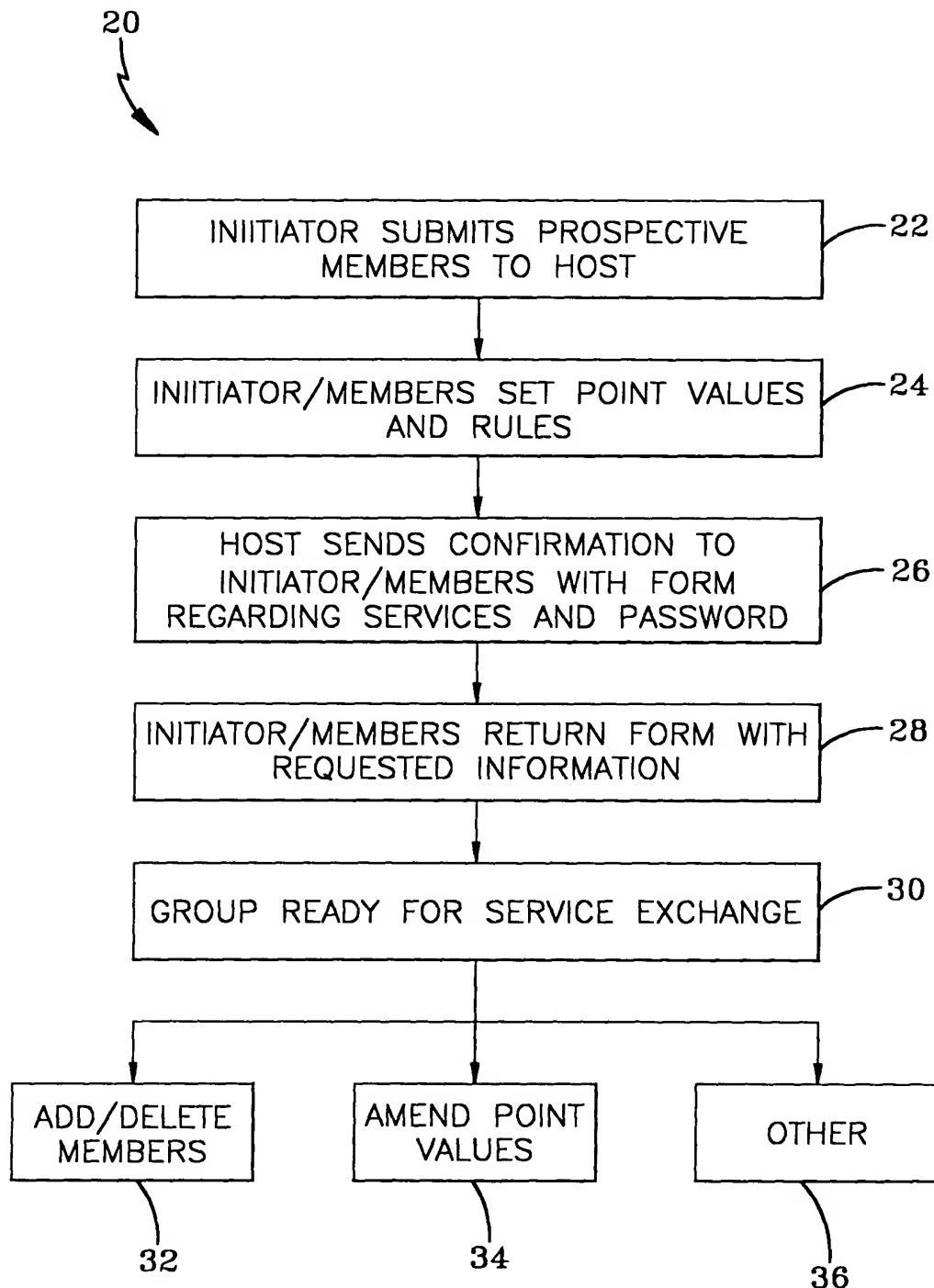


FIG-2

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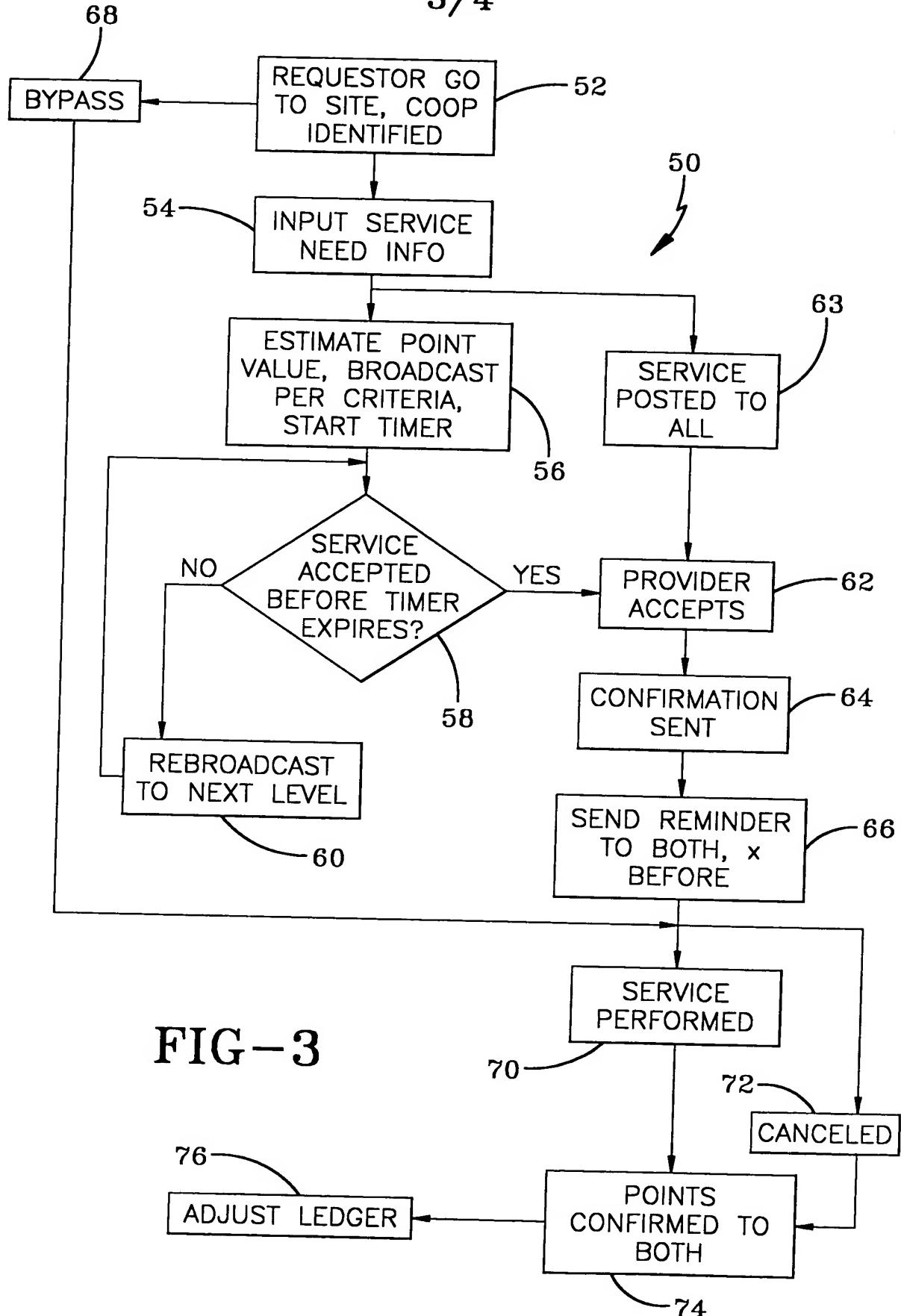


FIG-3

<u>SERVICE REQUEST FORM</u>	
REQUESTOR:	_____
SERVICE DATE:	_____
<u>TIME</u>	
START:	_____
FINISH:	_____
HOURS:	_____ (1/2 HOUR INCREMENTS)
<u>CHILD CARE</u>	
# OF KIDS:	_____ [1-x]
MEALS:	_____ [0,1,2,3]
LOCATION:	_____ [REQUESTOR, PROVIDER, EITHER]
ESTIMATED POINTS: _____	

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FIG-4